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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)
FY 2008*(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)*Docket Number (Optional)
121046-001Application Number **10/612,254**Filed **July 2, 2003**For **Michael LAMBRIGHT**Art Unit **3652**Examiner **Gregory Adams**

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):

| | <u>Fee</u> | <u>Small Entity Fee</u> | |
|---|------------|-------------------------|---------------|
| <input type="checkbox"/> One month (37 CFR 1.17(a)(1)) | \$120 | \$60 | \$ <u>0</u> |
| <input type="checkbox"/> Two months (37 CFR 1.17(a)(2)) | \$460 | \$230 | \$ <u>0</u> |
| <input type="checkbox"/> Three months (37 CFR 1.17(a)(3)) | \$1050 | \$525 | \$ <u>0</u> |
| <input checked="" type="checkbox"/> Four months (37 CFR 1.17(a)(4)) | \$1640 | \$820 | \$ <u>820</u> |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) | \$2230 | \$1115 | \$ <u>0</u> |

07/31/2008 CNGUYEN-00000021-122136

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☒ Applicant claims small entity status. See 37 CFR 1.27.

02 FC:2254

820.00 DA

☐ A check in the amount of the fee is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.☒ The Director has already been authorized to charge fees in this application to a Deposit Account.☒ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 12-2136. I have enclosed a duplicate copy of this sheet.**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**I am the ☐ applicant/inventor☐ assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).☒ attorney or agent of record. Registration Number 32,816☐ attorney or agent under 37 CFR 1.34.
Registration number if acting under 37 CFR 1.34 _____

Signature

July 28, 2008

Date

Michael S. Gzybowski

734-995-3110

Typed or printed name

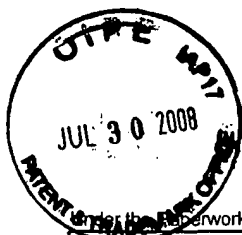
Telephone Number

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ Total of _____ forms are submitted.

This collection of information is required by 37 CFR 1.136(a). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 6 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you are required to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.



PTO/SB/22 (01-08)

Approved for use through 06/30/2008. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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Docket Number (Optional)

121046-001

Application Number 10/612,254

Filed July 2, 2003

For Michael LAMBRIGHT

Art Unit 3652

Examiner Gregory Adams

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|---|------------|-------------------------|--------|
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☒ Applicant claims small entity status. See 37 CFR 1.27.☐ A check in the amount of the fee is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.☒ The Director has already been authorized to charge fees in this application to a Deposit Account.☒ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 12-2136. I have enclosed a duplicate copy of this sheet.

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Signature

Michael S. Gzybowski

Typed or printed name

July 28, 2008

Date

734-995-3110

Telephone Number

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